

DISCLOSURE SUMMARY PAGE

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

IA ETHICS AND
CAMPAIGN DISCLOSURE BOARD

2014 JUL 17 AM 9:08

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Schettler

IMPORTANT: Indicate by # type of committee you are reporting for: 5

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Dean Schettler

Political Party (if applicable)

Democratic

Office Sought

Carroll County Supervisor, District Two

District (if Senate or House)

FORM

DR-2

(Rev. 12/2009)

DISCLOSURE
REPORT**For Office Use Only**Comm. # 19246

Logged In _____

Scanned _____

Computer _____

Audited _____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Dean Schettler, Treasurer
SIGNATURE OF PERSON FILING REPORT

712-830-3368
TELEPHONE

7/15/14
DATE SIGNED

I AM FILING A July 19, 2014

(report date)

REPORT FOR (1) ELECTION /(2) NON-ELECTION YEAR.

Indicate by # 1☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

June 3, 2014

County & Local Committees, enter County in
which Election is held
Carroll

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 0.00

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

1,205.00

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 1,205.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

1,040.67

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 164.33

****UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$ 0.00

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$ 292.72

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$ 0.00

CONSULTANT BREAKDOWN (Schedule G Attached?)YES ☒ NO**CANDIDATE COMMITTEES ONLY:****VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$ 0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Committee to Elect Schettler

SCHEDULE A (Rev. 12/13)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

FOR DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FUND- RAISER INCOME
03/05/14	ID# CK#	Timothy J. Gaffney 1815 Atlantic Blvd. Key West, FL 33040	N/A	\$100.00	<input type="checkbox"/>
05/16/14	ID# CK#	Joan Schettler 16326 120th St. Breda, IA 51436	spouse	\$500.00	<input type="checkbox"/>
06/23/14	ID# CK#	Dean Schettler 16326 120th St. Breda, IA 51436	Candidate	\$305.00	<input type="checkbox"/>
06/19/14	ID# CK#	Muriel McDermott 308 S. 3rd St. Breda, IA 51436	N/A	\$100.00	<input type="checkbox"/>
7/3/14	ID# CK#	Dean Schettler 16326 120th St. Breda, IA 51436	Candidate	\$200.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 1,205.00

TOTAL (if last page of this schedule)

\$ 1,205.00

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no applicable relationship, the relationship column

Page 1 of 1 familial relationship,
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Schettler

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
6/22/14	ID# 19246 CK#92	The Glidden Graphic P.O. Box 607 Glidden, IA 51443	Elect Schettler advertising and thank you ad	\$ 57.00
6/22/14	ID# 19246 CK#93	Options Ink 858 E. Hwy 30 Carroll, IA 51401	Primary Election Flyers	\$275.85
6/22/14	ID# 19246 CK# 94	Manning Municipal Communication & TV System Utility (MMCTSU) 719 3rd St. Manning, IA 51455	Channel 10 Advertising	\$50.00
6/22/14	ID# 19246 CK#95	Daily Times Herald P.O. Box 546 Carroll, IA 51401	Elect Schettler advertising and inserting Primary Election flyers	\$458.82
7/10/14	ID# 19246 CK#96	The Manning Monitor P.O. Box 346 Manning, IA 51455	Elect Schettler advertising	\$160.00
7/10/14	ID# 19246 CK#97	Daily Times Herald P.O. Box 546 Carroll, IA 51401	Thank you ad	\$39.00
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1,040.67
TOTAL (if last page of this schedule)				\$ 1,040.67

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee to Elect Schettler

Reset Form

SCHEDULE

E

(Rev. 06/97)

IN-KIND
CONTRIBUTIONS☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
05/07/14	Dean Schettler 16326 120th St. Breda, IA 51436	Candidate	Yard Signs	\$ 282.72	<input type="checkbox"/>
05/08/14	Joan Schettler 16326 120th St. Breda, IA 51436	spouse	Voter List	10.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 292.72	
TOTAL (if last page of this schedule)				\$ 292.72	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.